facilities that exist in this country for the practice of unregistered practitioners, it is most important that all practitioners, whether registered or unregistered, should be com-

pelled to notify cases of contagious disease.

Although Mr. Allinson was convicted, I cannot help thinking the conviction was open to very serious doubts as to its legality, and may not be followed as a precedent on other occasions. It is true that in the Notification Act the term "medical practitioner" is not defined, but it is well recognized at law that a medical practitioner means one registered under the Medical Acts, and only such can recover fees for their services in courts of law. If the Allinson conviction were right, it would follow that had he notified the cases in question, he might have claimed the fees allowed by the Act for such notification. I have never heard it suggested that any but registered practitioners can claim these fees. Is it reasonable to conclude, without it being specially laid down in the Act to this effect, that an unregistered practitioner is subject to certain duties, without having any claim to the payments ordered for their performance?—I am, etc.

Hackney Road, N.E., Nov. 3rd. MAJOR GREENWOOD.

# THE EVOLUTION OF THE ROYAL NAVAL MEDICAL SERVICE.

1. Amalgamation of Sick Berth Staff, R.N., with Naval Medical Officers into Royal Naval Medical Corps.

I propose an amalgamation of these two bodies doing

the same class of duty into a single corps like the R.A.M.C. It would develop efficiency and esprit de corps.

2. In future, copy the Royal Marine Organization.
In future years, the evolution of the Royal Naval Medical
Corps should copy the Royal Marine model, and become fully militarized. When on shore it should be divided into three main divisions like the Royal Marines, and have its local head quarters at the great hospitals at Chatham, Portsmouth, and Plymouth respectively, with its bands of music, barracks for subordinates, and all the usual subsidiary establishments of a marine division.

3. Military Titles.

By complete militarization, the titles now used by the Royal Marines would be used by officers and men of Naval Medical Corps, and it would exercise over its officers and men the same discipling mad by the Royal Medical Corps. men the same discipline used by the Royal Marines in its shore establishments. When a ship was commissioned, the needed detachment of the R.N.M.C. would march on board, as the Royal Marine Detachment now does, and on the termination of the Commission would return to duty at its

divisional headquarters as the Royal Marines now do.

Such a Royal Naval Medical Corps could copy all the developments of field hospitals and drill as used in the

R.A.M.C.

It seems essential to me, if national efficiency is to be maintained, that this evolution should take place in the Royal Naval Medical Service, so that the Royal Naval Engineer Service might copy it, and become a military boad exactly like the Royal Marine Artillery—in my opinion the true termination of the struggle between the combatant and engineer branches of the Royal Navy.—I am. etc.,

Salisbury, Nov. 1st. GEORGE EVATT.

#### THE EARLIEST MUNICIPAL LABORATORY.

Sir,-With reference to your editorial note on municipal laboratories, and your ascription of credit to Bristol as the first of them, will you allow me to point out that such a laboratory has been in operation in this borough for five years, and was, so far as I know, the very first of its kind in the United Kingdom? I may add that you gave a somewhat distillations of the control of the contr what detailed account of its establishment and lines of work at the time, and have more than once commented on it since then.—I am, etc.,

November 1st.

EDWARD C. BOUSFIELD, Bacteriologist for the Borough of Camberwell.

#### TREATMENT OF CARCINOMA BY THYROID EXTRACT.

Sir,—Will you kindly permit me to call attention to a slight error which Mr. Henry Morris makes in giving the date of a paper I read before the British Gynaecological Society on the

treatment of carcinoma by thyroid extract. The date was April, 1896, not 1897, and I cited four cases (not two) which recovered under the treatment mentioned. I have kept these patients under observation ever since, and so far there has been no recurrence. One of these was delivered of a healthy child about two years ago, and I saw her a few days ago prior to her departure for South Africa.

The date of my communication to the British Gynae-cological Society I think clearly warrants me in laying claim to priority in advocating this method of treatment.—

I am, etc., Glasgow, Oct. 23rd.

ROBERT BELL.

#### MEDICINE AND MATRIMONY.

SIR,—With reference to the letter on the above subject by Mr. Cooper in the BRITISH MEDICAL JOURNAL of October 25th, I may say that I have often heard the late Sir G. M. Humphry state that he had never but once distinctly told a man that he ought not to marry because he considered his patient could not possibly possess the necessary vigour, but that the patient married in spite of his advice, and begat a large family.—I am, etc.,

Finchley Road, N., Nov. 4th.

WALTER G. WALFORD.

#### MEDICAL DEFENCE UNION.

Sir,—Before imposing an entrance fee the Council of the Medical Defence Union should have ascertained the wishes of its members

To do anything which may tend to restrict the growth of the Union is a doubtful policy; nor should it be necessary to impose a heavier tax on the smaller incomes of the more re-

pose a heavier tax on the smaller incomes of the more re-cently qualified practitioners, from whose ranks the bulk of new members should naturally come.

The reason given for this important change is the success of the Union. This hardly constitutes an urgent matter; and if the Council will hold its hand for a few months the question can be far more satisfactorily decided at the next annual meeting.—I am, etc.,

Barking Road, E., Oct. 29th.

PERCY ROSE.

## OBITUARY.

#### LENNOX BROWNE, F.R.C.S.Edin.,

Consulting Surgeon, Central London Throat, Nose and Ear Hospital. Mr. Lennox Browne, the well-known specialist in diseases of the throat, died of malignant disease of the liver at Northwood, on Sunday last, in the sixty-second year of his age. Mr. Lennox Browne, whose real name was Isaac Baker Brown, was the son of the well known surgeon of that name, who was one of the pioneers of ovariotomy in this country. After his one of the pioneers of ovariotomy in this country. After his father fell under the ban of the profession and was expelled from the Obstetrical Society, the son obtained leave to change his name to that by which he was known for the greater part of his professional life. Though he abandoned his paternal name, he contributed to the support of his father in the last few years of his life, which were spent in straitened circumstances, and this at a time when his own resources were very alender. very slender.

Mr. Lennox Browne's natural inclination was towards art, and at the age of 18 he exhibited some paintings at the Society of British Artists in Suffolk Street. But he was destined for of British Artists in Suifolk Street. But he was destined for the medical profession, and he studied for that purpose first at Edinburgh, and afterwards in London at St. George's and Middlesex Hospitals. So strong was his bent towards art, however, that he is said to have abandoned his medical studies on one occasion and set up as a teacher of drawing. In 1863 he was admitted to the Membership of the Royal College of Surgeons of England, and ten years later he became a Fellow of the Edinburgh College. Soon after obtaining his

a Fellow of the Edinburgh College. Soon after obtaining his diploma he went to Australia, where he practised for some time. His earliest publication was a work entitled, Australia for Invalids, which appeared in 1865. About 1867 he became assistant to the late Dr. (afterwards Sir) Morell Mackenzie, with whom he continued to be associated for seven years. During that period he was on the staff of the Hospital for Diseases of the Throat, Golden Square. Severing his connexion with that institution and 1566 TAR BRITISH MEDICAL JOURNAL

with Morell Mackenzie in 1874, he founded the Central London Throat, Nose, and Ear Hospital in Gray's Inn Road. He was the Senior Surgeon to that hospital for many years, and on his retirement from the active staff he was appointed Consulting Surgeon. He was also Surgeon and Aural Surgeon to the Royal Society of Musicians, to the Royal Choral Society, and to the Dramatic Sick Fund. He was one of the original Fellows, and at one time President of the British Laryngological and Rhinological Association. He was also a Fellow of the Medical and Pathological Societies, an honorary member of the Philadelphia Medical Society, and a Corresponding Fellow of the American Laryngological Association.

Mr. Lennox Browne contributed largely to the literature of his special department of practice. His chief work is a textbook entitled The Throat and Nose and Their Diseases, a fifth edition of which appeared in 1898. This work was translated into French. Among his other writings are: Diphtheria and Its Associates, a second edition of which was published in 1896; The Mechanism of Voice, Speech, and Taste, with atlas (1879); The Mechanism of Hearing, with atlas (1880); Medical Hints on the Production and Management of the Singing Voice (1876); Practical Remarks on Throat and Ear Diseases (1877); Voice Use and Stimulants (1885); The Child's Voice (1885); Voice, Song, and Speech: a Complete Manual for Singers and Speakers, produced in collaboration with Emil Behnke; this work reached its eighteenth edition in 1807; and was translated edition of which appeared in 1898. This work was translated reached its eighteenth edition in 1897; and was translated into French in 1893. Mr. Browne was also the author of the article on "Deformities and Morbid Growths of the Pharynx article on "Deformities and Morbid Growths of the Pharynx and Larynx" in Burnett's System of Diseases of the Ear, Nose, and Throat (Philadelphia, 1893); and of pamphlets on "The Treatment of Benign Growths in the Larynx," "Goître," "Post-nasal Catarrh in Relation to Deafness," (1875-6-7); "Chronic Middle-ear Deafness (1880)," "Tuberculosis affecting, Mouth and Throat" (1881), and "Koch's Remedy, in Relation Specially to Throat Consumption."

Mr. Browne was an industrious compiler and he helped to

Mr. Browne was an industrious compiler, and he helped to diffuse among the general body of the profession a knowledge of the branch of medical practice in which he chiefly interested himself. The record of the observations of a man of so large an experience must always be valuable, and its value in the case of Mr. Lennox Browne was greatly increased by the accuracy with which his artistic talent enabled him to make oculis subjecta fidelibus the things which he saw. A special feature of his books is the beauty of the illustrations, which were executed by himself. He was an accomplished artist, and it is said that his annual holiday was paid for by the sale of drawings, which have been exhibited for thirty years at the various water-colour exhibitions. Indeed, the best record of his work and his most permanently valuable contributions to science are to be found in his coloured drawings of diseased conditions. He was one of the oldest members of the Savage Club, and had a very large acquaintance among members of the dramatic, artistic, and literary world. He was a prominent Freemason, being a Grand Officer of England, as well as of the Grand Lodge of New Zealand.

Mr. Lennox Browne was married, but leaves no family.

The funeral service took place at Northwood Parish Church on November 5th.

### ROYAL NAVY AND ARMY MEDICAL SERVICES.

WAR HONOURS.
THE London Gazette of October 31st contains a long list of further honours in recognition of services during the operations in South Africa to bear date August 22nd, 1902, except where otherwise stated. From it we extract the following:

Surgeon-Major W. B. Crooke-Lawless, M.D., to be Surgeon-

Surgeon-Major W. R. Crooke-Lawless, M.D., to be Surgeon-Lieutenant-Colonel, Coldstream Guards.

Royal Army Medical Corps.—Lieutenant-Colonel H. H.

Johnston, M.D., to be a Companion of the Order of the Bath;
Major M. P. C. Holt, Major W. W. O. Beveridge, M.B., and
Captain T. C. Mackenzie, to be Companions of the Distinguished Service Order; Majors C. Birt, M. W. Russell, and S.

Hickson, M.B., to be Brevet Lieutenant-Colonels; Captains
D. Shanahan and A. F. Tyrell to be Brevet Majors.

Company Colonials —Surgeon-Major I. A. Devine and Capa-

Oversea Colonials.—Surgeon-Major J. A. Devine, 2nd Canadian Mounted Rifles, and Surgeon-Captain H. J. Hutchens,

Queensland Contingents, to be Companions of the Distinguished Service Order.

The following honours are granted for services during the operations in South Africa elsewhere than in that country.

operations in South Africa eisewhere than in that country, also dated August 22nd:
Lieutenant-Colonel E. M. Wilson, C.M.G., D.S.O., Royal Army Medical Corps; Lieutenant-Colonel W. Johnston, M.B., retired pay, and Brigade-Surgeon - Lieutenant-Colonel A. Crombie, M.D., retired, late Indian Medical Service, to be Companions of the Order of the Bath, Civil Division.

Civil-Surgeons W. F. Tyndale and E. Langley-Hunt, to be Companions of the Order of St. Michael and St. George.

An erratum is added that Civil Surgeon J. Lunn appeared in Lord Kitchener's despatch of March 2th 1902 (London)

in Lord Kitchener's despatch of March 8th, 1902 (London Gazette, April 25th), as Civil Surgeon J. Munn.

ROYAL NAVY MEDICAL SERVICE.

The session of special instruction at the Royal Naval Hospital, Haslar, terminated on October 24th.

The prizes were awarded as follows:

The gold medal and microscope to Surgeon Charles A. G. Phipps, late of the London Hospital; the silver medal and To worth of books to Surgeon Stanley S. H. Shannon, late of Guy's Hospital.

Surgeons in Order of Seniority.						
Marks.					Marks.	
Charles A. G. Phipps		4,230	Reginald L. Jones, B.A.			
Stanley S. H. Shannon		3,537	Robert H. Atkins, B.A.,			
Charles K. Bushe, B.A., M.			Charles J. O'Connell	- ···	2,789	
William R. Harrison	•••	3,141	James A. Thompson,		_	
Walter G. Edwards		3,105	<b>М</b> .В	•••	2,756	
Frank E. Bolton	•••	3,005				

THE following appointments have been made at the Admiralty: WILLIAM BASTIAN, Surgeon, to the Woodcock, November 1st; John Thornhill, M.B., Surgeon, to the Kinsha, November 1st; Y. L. RICHARDS, Surgeon, to the President, for three months' course of hospital study, November 10th; A. T. GAILLETON, M.B., Surgeon, to the Vernon (lent), undated; C. K. BUSHE, B.A., M.D., and C. J. O'CONNELL, Surgeons, to the Duke of Wellingon, additional, for disposal, November 22nd; R. L. Jones, B.A., R. H. ATKINS, B.A., M.B., and S. S. H. SHANNON, Surgeons, to the Vivid, additional, for disposal, November 22nd; W. G. EDWARDS and F. E. BOTTON, Surgeons, to the Pembroke, additional, for disposal, November 22nd. Civil Practitioner J. G. Murray has been appointed Surgeon and Agentat Scarborough. October 20th.

at Scarborough, October 29th.

ROYAL ARMY MEDICAL CORPS.

COLONEL N. B. MAJOR retires on retired pay, November 5th. Helentered the service as Assistant Surgeon, October 2nd, 1866; and was gazetted to the 16th (Queen's Lancers) in August, 1868. He served with that regiment until 1875. He became Surgeon, March 1st, 1873; Surgeon-Major, October 2nd, 1878; Brigade-Surgeon, December 14th, 1892; and Surgeon-Colonel, November 3oth, 1896; retiring on half pay, November 6th, 1900. He was restored to the establishment as Colonel, January 4th, 1902. He has no war record in the Army Lists.

Captain G. C. Phipps, from temporary half-pay, retires on retired pay; November 5th. His first commission was dated January 28th, 1899; that of Captain, January 28th, 1900. He was placed on temporary half-pay on account of ill-health, July 6th, 1902.

Lieutenant Hugh Richardson, M.B., resigns his commission, November 5th. He was appointed Lieutenant, April 25th, 1900, and served in the South African war.

THE UNIFORM OF THE R.A.M.C.

COLONEL R.A.M.C. writes: Under the above heading a "Lieutenant-Colonel R.A.M.C." writes in severe condemnation of the present messuniform of his corps. He states "that it is distasteful to every officer of the corps," "has never met any one who approved of it," etc. These statements are sufficiently sweeping; are they justifiable? I, for one, entirely approve of the present mess uniform of my corps, and have never heard any opinion other than favourable regarding it.

VOLUNTEER MEDICAL ASSOCIATION.

At the quarterly meeting of the Council of the Volunteer Medical Association held on October 28th the chair was taken by Brigade-Surgeon-Lieutenant-Colonel Andrew Clark, V.D., and there were present eighteen other medical officers. It was announced that Sir William Taylor, K.C.B., Director General A.M.S., had accepted the offices of Vice-President and Shield Trustee. A letter of thanks from the Mayor of Westminster was read for the provision by the Association of medical officers and stretcher squads at the King's dinner to the poor in Westminster. On the proposition of Brigade-Surgeon-Lieutenant-Colonel H. G. Thompson, M.D., seconded by the Honorary Secretary, Surgeon-Major J. J. de Zouche-Marshall, it was resolved to rescind the rule excluding from the annuab challenge shield competition the winning squad of the previous year. A number of other proposals put forward by the Honorary Secretary with regard to the competition were considered, and it was resolved: (r) That in the case of a tie the men be ordered to drill with changed numbers as an alternative to No. 4 working the squad as at present; (2) That Rule 15, which restricts each regiment to entering but one squad for the final competition, should be rescinded. It was agreed to support the proposition of the Director-General to found a journal for the Royal Army Medical Corps and all branches of the medical services.